

Fill in this information to identify your case and this filing:

Debtor 1	BERTIE SUSAN BRODSKY	
	First Name	Middle Name
Debtor 2	Last Name	
(Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA	
Case number	<u>4:16-bk-885-BMW</u>	

Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.
 Yes. Where is the property?

1.1

2110 E Island Lake Dr

Street address, if available, or other description

Shelton WA 98584-9184

City State ZIP Code

Mason

County

What is the property? Check all that apply

- Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property?

\$375,000.00

Current value of the portion you own?

\$375,000.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Fee Simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.2

7015 A and B Gaston Ln SW

Street address, if available, or other description

Tumwater WA 98512

City State ZIP Code

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$185,000.00****Current value of the portion you own?****\$185,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.3

7016 A and B Gaston Ln SW

Street address, if available, or other description

Tumwater WA 98512

City State ZIP Code

What is the property? Check all that apply

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$185,000.00****Current value of the portion you own?****\$185,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

If you own or have more than one, list here:

1.4

6172 E 20th St

Street address, if available, or other description

Tucson AZ 85711-5218

City

State

ZIP Code

What is the property? Check all that apply

- Single-family home
 Duplex or multi-unit building
 Condominium or cooperative
 Manufactured or mobile home
 Land
 Investment property
 Timeshare
 Other _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property?**\$105,000.00****Current value of the portion you own?****\$105,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

Fee Simple

Check if this is community property
(see instructions)

Other information you wish to add about this item, such as local property identification number:

Debtor's Residence

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$850,000.00**Part 2: Describe Your Vehicles**

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No
 Yes

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No
 Yes

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$0.00**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

- No
 Yes. Describe.....

Kitchen table and chairs	\$250.00
Living Room couch	\$150.00
Living Room Chairs	\$100.00
Coffee and End Tables	\$200.00

Lamps	\$60.00
Rugs	\$20.00
Beds	\$375.00
Bed Table	\$25.00
Dressers	\$500.00
Bedding	\$50.00
Stove	\$300.00
Refrigerator	\$300.00
Washer	\$150.00
Dryer	\$150.00
Vacuum Cleaner	\$30.00
Book Shelves	\$20.00
China Cabinet	\$30.00
Cooking Utensils	\$50.00
Dishware	\$200.00
DVDs/CDs	\$150.00
Flatware	\$50.00
Kitchen Hutch	\$25.00
Microwave	\$25.00
Mirrors	\$35.00
Small Appliances	\$150.00
Decorative Items	\$250.00
Patio Furniture	\$100.00
Pots and Pans	\$50.00
Printer	\$50.00
TV Stand	\$20.00

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Yes. Describe.....

TV	\$100.00
Stereo	\$25.00

Alarm Clock	\$5.00
Computer	\$50.00
DVD Player	\$10.00

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.....

David Winter Cottages	\$200.00
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9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Yes. Describe.....

1 Bicycle	\$20.00
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Sewing Machine	\$25.00
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10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Yes. Describe.....

Clothing	\$500.00
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12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Yes. Describe.....

Wedding Ring	\$75.00
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Jewelry	\$240.00
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Watch	\$80.00
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13. Non-farm animals

Examples: Dogs, cats, birds, horses

No

Yes. Describe.....

Weimaraner Dog	\$0.00
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14. Any other personal and household items you did not already list, including any health aids you did not list

No

Yes. Give specific information.....

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

\$5,195.00

Part 4: Describe Your Financial Assets**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?
Do not deduct secured claims or exemptions.**

16. Cash*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- No
 Yes.....

17. Deposits of money*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- No
 Yes.....

Institution name:

17.1.	Chase Checking Account - XXXX1917	\$373.00
17.2.	Chase Checking Account - XXXX2287	\$25.00

18. Bonds, mutual funds, or publicly traded stocks*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

- No
 Yes.....

Institution or issuer name:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

- No
 Yes. Give specific information about them.....

Name of entity:

% of ownership:

20. Government and corporate bonds and other negotiable and non-negotiable instruments*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

- No
 Yes. Give specific information about them

Issuer name:

21. Retirement or pension accounts*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

- No
 Yes. List each account separately.

Type of account:	Institution name:	
401(k) or Similar Plan	Fidelity 401K	\$11,100.00
401(k) or Similar Plan	Vanguard 401K	\$1,200.00
Retirement Account	LPL Financial	\$379.18

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

- No
 Yes.

Institution name or individual:

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

- No
 Yes.....

Issuer name and description.

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No Yes.....

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No Yes. Give specific information about them...**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

 No Yes. Give specific information about them...**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

 No Yes. Give specific information about them...**Money or property owed to you?**

Current value of the portion you own?
 Do not deduct secured claims or exemptions.

28. Tax refunds owed to you No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

 No Yes. Give specific information.....**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

 No Yes. Give specific information..**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

 No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

Lincoln Benefit Life InsuranceSpouse/Children\$2,760.37**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

 No Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....

35. Any financial assets you did not already list

- No
 Yes. Give specific information..

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....**\$15,837.55****Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.****37. Do you own or have any legal or equitable interest in any business-related property?**

- No. Go to Part 6.
 Yes. Go to line 38.

Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.

If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.
 Yes. Go to line 47.

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**53. Do you have other property of any kind you did not already list?**

Examples: Season tickets, country club membership

- No
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here**\$0.00****Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2		\$850,000.00
56. Part 2: Total vehicles, line 5	\$0.00	
57. Part 3: Total personal and household items, line 15	\$5,195.00	
58. Part 4: Total financial assets, line 36	\$15,837.55	
59. Part 5: Total business-related property, line 45	\$0.00	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	\$0.00	
62. Total personal property. Add lines 56 through 61...	\$21,032.55	Copy personal property total \$21,032.55
63. Total of all property on Schedule A/B. Add line 55 + line 62		\$871,032.55

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)	4:16-bk-885-BMW		

Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
6172 E 20th St Tucson AZ, 85711-5218 Line from <i>Schedule A/B</i> 6.4	\$105,000.00	<input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1101(A)
Kitchen table and chairs Line from <i>Schedule A/B</i> 6.1	\$250.00	<input checked="" type="checkbox"/> \$250.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Living Room couch Line from <i>Schedule A/B</i> 6.2	\$150.00	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Living Room Chairs Line from <i>Schedule A/B</i> 6.3	\$100.00	<input checked="" type="checkbox"/> \$100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Coffee and End Tables Line from <i>Schedule A/B</i> 6.4	\$200.00	<input checked="" type="checkbox"/> \$200.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Check only one box for each exemption.	
Lamps Line from <i>Schedule A/B</i> 6.5	<u>\$60.00</u>	<input checked="" type="checkbox"/> \$60.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Rugs Line from <i>Schedule A/B</i> 6.6	<u>\$20.00</u>	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Beds Line from <i>Schedule A/B</i> 6.7	<u>\$375.00</u>	<input checked="" type="checkbox"/> \$375.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Bed Table Line from <i>Schedule A/B</i> 6.8	<u>\$25.00</u>	<input checked="" type="checkbox"/> \$25.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Dressers Line from <i>Schedule A/B</i> 6.9	<u>\$500.00</u>	<input checked="" type="checkbox"/> \$500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Bedding Line from <i>Schedule A/B</i> 6.10	<u>\$50.00</u>	<input checked="" type="checkbox"/> \$50.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Stove Line from <i>Schedule A/B</i> 6.11	<u>\$300.00</u>	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Refrigerator Line from <i>Schedule A/B</i> 6.12	<u>\$300.00</u>	<input checked="" type="checkbox"/> \$300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Washer Line from <i>Schedule A/B</i> 6.13	<u>\$150.00</u>	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Dryer Line from <i>Schedule A/B</i> 6.14	<u>\$150.00</u>	<input checked="" type="checkbox"/> \$150.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Vacuum Cleaner Line from <i>Schedule A/B</i> 6.15	<u>\$30.00</u>	<input checked="" type="checkbox"/> \$30.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Book Shelves Line from <i>Schedule A/B</i> 6.16	<u>\$20.00</u>	<input checked="" type="checkbox"/> \$20.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		Copy the value from <i>Schedule A/B</i>	<i>Check only one box for each exemption.</i>
China Cabinet Line from <i>Schedule A/B</i> 6.17	<u>\$30.00</u>	<input checked="" type="checkbox"/> <u>\$30.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Cooking Utensils Line from <i>Schedule A/B</i> 6.18	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Dishware Line from <i>Schedule A/B</i> 6.19	<u>\$200.00</u>	<input checked="" type="checkbox"/> <u>\$200.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
DVDs/CDs Line from <i>Schedule A/B</i> 6.20	<u>\$150.00</u>	<input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Flatware Line from <i>Schedule A/B</i> 6.21	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Kitchen Hutch Line from <i>Schedule A/B</i> 6.22	<u>\$25.00</u>	<input checked="" type="checkbox"/> <u>\$25.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Microwave Line from <i>Schedule A/B</i> 6.23	<u>\$25.00</u>	<input checked="" type="checkbox"/> <u>\$25.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Mirrors Line from <i>Schedule A/B</i> 6.24	<u>\$35.00</u>	<input checked="" type="checkbox"/> <u>\$35.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Small Appliances Line from <i>Schedule A/B</i> 6.25	<u>\$150.00</u>	<input checked="" type="checkbox"/> <u>\$150.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Decorative Items Line from <i>Schedule A/B</i> 6.26	<u>\$250.00</u>	<input checked="" type="checkbox"/> <u>\$250.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Patio Furniture Line from <i>Schedule A/B</i> 6.27	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Pots and Pans Line from <i>Schedule A/B</i> 6.28	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
			Copy the value from <i>Schedule A/B</i>
Printer Line from <i>Schedule A/B</i> 6.29	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
TV Stand Line from <i>Schedule A/B</i> 6.30	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
TV Line from <i>Schedule A/B</i> 7.1	<u>\$100.00</u>	<input checked="" type="checkbox"/> <u>\$100.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Stereo Line from <i>Schedule A/B</i> 7.2	<u>\$25.00</u>	<input checked="" type="checkbox"/> <u>\$25.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Alarm Clock Line from <i>Schedule A/B</i> 7.3	<u>\$5.00</u>	<input checked="" type="checkbox"/> <u>\$5.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
Computer Line from <i>Schedule A/B</i> 7.4	<u>\$50.00</u>	<input checked="" type="checkbox"/> <u>\$50.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
DVD Player Line from <i>Schedule A/B</i> 7.5	<u>\$10.00</u>	<input checked="" type="checkbox"/> <u>\$10.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1123
1 Bicycle Line from <i>Schedule A/B</i> 9.1	<u>\$20.00</u>	<input checked="" type="checkbox"/> <u>\$20.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1125(7)
Sewing Machine Line from <i>Schedule A/B</i> 9.2	<u>\$25.00</u>	<input checked="" type="checkbox"/> <u>\$25.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1125(7)
Clothing Line from <i>Schedule A/B</i> 11.1	<u>\$500.00</u>	<input checked="" type="checkbox"/> <u>\$500.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1125(1)
Wedding Ring Line from <i>Schedule A/B</i> 12.1	<u>\$75.00</u>	<input checked="" type="checkbox"/> <u>\$75.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1125(4)
Jewelry Line from <i>Schedule A/B</i> 12.2	<u>\$240.00</u>	<input checked="" type="checkbox"/> <u>\$240.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1125(4)

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
		<i>Check only one box for each exemption.</i>	
Watch Line from <i>Schedule A/B</i> 12.3	<u>\$80.00</u>	<input checked="" type="checkbox"/> <u>\$80.00</u> <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1125(6)
Chase Checking Account - XXXX1917 Line from <i>Schedule A/B</i> 17.1	<u>\$373.00</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1126(A)(9)
Chase Checking Account - XXXX2287 Line from <i>Schedule A/B</i> 17.2	<u>\$25.00</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1126(A)(9)
Fidelity 401K Line from <i>Schedule A/B</i> 21.1	<u>\$11,100.00</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1126(B)
Vanguard 401K Line from <i>Schedule A/B</i> 21.2	<u>\$1,200.00</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1126(B)
LPL Financial Line from <i>Schedule A/B</i> 21.3	<u>\$379.18</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 33-1126(B)
Lincoln Benefit Life Insurance Line from <i>Schedule A/B</i> 31.1	<u>\$2,760.37</u>	<input type="checkbox"/> <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	Ariz. Rev. Stat. § 20-1131

3. Are you claiming a homestead exemption of more than \$155,675?

(Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.)

No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

No

Yes

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)	4:16-bk-885-BMW		

Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A	Column B	Column C
Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any
\$78,163.00	\$105,000.00	\$0.00

2.1 Ditech Financial LLC

Creditor's Name

Describe the property that secures the claim:

6172 E 20th St, Tucson, AZ
85711-5218

Debtor's Residence

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number **9681**

2.2 Nationstar Mortgage LLC

Creditor's Name

Describe the property that secures the claim:

7016 A and B Gaston Ln SW,
Tumwater, WA 98512

\$216,245.00	\$185,000.00	\$31,245.00
--------------	--------------	-------------

8950 Cypress Waters
Blvd
Coppell, TX 75019-4620

Number, Street, City, State & Zip Code

As of the date you file, the claim is: Check all that apply.

- Contingent
 Unliquidated
 Disputed

Nature of lien. Check all that apply.

- An agreement you made (such as mortgage or secured car loan)
 Statutory lien (such as tax lien, mechanic's lien)
 Judgment lien from a lawsuit
 Other (including a right to offset) _____

Who owes the debt? Check one.

- Debtor 1 only
 Debtor 2 only
 Debtor 1 and Debtor 2 only
 At least one of the debtors and another
 Check if this claim relates to a community debt

Date debt was incurred _____

Last 4 digits of account number **6090**

Debtor 1	BERTIE SUSAN BRODSKY			Case number (if known)	4:16-bk-885-BMW	
First Name	Middle Name	Last Name				
2.3 Nationstar Mortgage LLC Creditor's Name			Describe the property that secures the claim:	\$188,725.00	\$185,000.00	\$3,725.00
			7015 A and B Gaston Ln SW, Tumwater, WA 98512			
8950 Cypress Waters Blvd Coppell, TX 75019-4620 Number, Street, City, State & Zip Code			As of the date you file, the claim is: Check all that apply.			
			<input type="checkbox"/> Contingent			
			<input type="checkbox"/> Unliquidated			
			<input type="checkbox"/> Disputed			
Who owes the debt? Check one.			Nature of lien. Check all that apply.			
<input checked="" type="checkbox"/> Debtor 1 only			<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Judgment lien from a lawsuit			
<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Other (including a right to offset)			
<input type="checkbox"/> Check if this claim relates to a community debt						
Date debt was incurred			Last 4 digits of account number	6082		
2.4 Wells Fargo Bank Nv NA Creditor's Name			Describe the property that secures the claim:	\$324,949.00	\$375,000.00	\$324,949.00
			2110 E Island Lake Dr, Shelton, WA 98584-9184			
MAC F8235-02F PO Box 10438 Des Moines, IA 50306-0438 Number, Street, City, State & Zip Code			As of the date you file, the claim is: Check all that apply.			
			<input type="checkbox"/> Contingent			
			<input type="checkbox"/> Unliquidated			
			<input type="checkbox"/> Disputed			
Who owes the debt? Check one.			Nature of lien. Check all that apply.			
<input checked="" type="checkbox"/> Debtor 1 only			<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Judgment lien from a lawsuit			
<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Other (including a right to offset)			
<input type="checkbox"/> Check if this claim relates to a community debt						
Date debt was incurred			Last 4 digits of account number	0001		
2.5 Wells Fargo Hm Mortgag Creditor's Name			Describe the property that secures the claim:	\$568,000.00	\$375,000.00	\$193,000.00
			2110 E Island Lake Dr, Shelton, WA 98584-9184			
8480 Stagecoach Cir Frederick, MD 21701-4747 Number, Street, City, State & Zip Code			As of the date you file, the claim is: Check all that apply.			
			<input type="checkbox"/> Contingent			
			<input type="checkbox"/> Unliquidated			
			<input type="checkbox"/> Disputed			
Who owes the debt? Check one.			Nature of lien. Check all that apply.			
<input checked="" type="checkbox"/> Debtor 1 only			<input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)			
<input type="checkbox"/> Debtor 2 only			<input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)			
<input type="checkbox"/> Debtor 1 and Debtor 2 only			<input type="checkbox"/> Judgment lien from a lawsuit			
<input type="checkbox"/> At least one of the debtors and another			<input type="checkbox"/> Other (including a right to offset)			
<input type="checkbox"/> Check if this claim relates to a community debt						
Date debt was incurred			Last 4 digits of account number	6703		

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1,376,082.00

If this is the last page of your form, add the dollar value totals from all pages.

\$1,376,082.00

Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

- | | | |
|--------------------------|--|--|
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Nationstar Mortgage LI
PO Box 199111
Dallas, TX 75235 | On which line in Part 1 did you enter the creditor? <u>2.2</u> |
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Nationstar Mortgage LI
PO Box 199111
Dallas, TX 75235 | On which line in Part 1 did you enter the creditor? <u>2.3</u> |
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Quality Loan Service Corp of WA
2763 Camino del Rio S Fl 1
San Diego, CA 92108-3708 | On which line in Part 1 did you enter the creditor? <u>2.2</u> |
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Quality Loan Service Corp. of WA
c/o Quality Loan Service Corp.
411 Ivy St
San Diego, CA 92101-2108 | On which line in Part 1 did you enter the creditor? <u>2.4</u> |
| <input type="checkbox"/> | Name, Number, Street, City, State & Zip Code
Wells Fargo Bank Nv NA
PO Box 31557
Billings, MT 59107-1557 | On which line in Part 1 did you enter the creditor? <u>2.4</u> |

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)	4:16-bk-885-BMW		

Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount	
2.1 Internal Revenue Service Priority Creditor's Name	Last 4 digits of account number <u>2068</u>	\$32,796.62	\$32,796.62	\$0.00
PO Box 37900 Hartford, CT 06176-7900 Number Street City State Zip Code	When was the debt incurred? <u>2012, 2013, 2014</u>			
Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Domestic support obligations			
Is the claim subject to offset?	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<input type="checkbox"/> Other. Specify _____			

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.
 Yes.

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

Debtor 1 **BRODSKY, BERTIE SUSAN**

Case number (if known)

4:16-bk-885-BMW

4.1	Ally Financial Nonpriority Creditor's Name <hr/> PO Box 380901 Bloomington, MN 55438-0901 Number Street City State Zip Code	Last 4 digits of account number 3443 When was the debt incurred?	\$3,223.00
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____</p> <p><input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>			
4.2	Amex Nonpriority Creditor's Name <hr/> Correspondence PO Box 981540 EI Paso, TX 79998-1540 Number Street City State Zip Code	Last 4 digits of account number 1323 When was the debt incurred?	\$6,076.00
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____</p> <p><input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>			
4.3	Bank Of America Nonpriority Creditor's Name <hr/> NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012 Number Street City State Zip Code	Last 4 digits of account number 7042 When was the debt incurred?	\$20,933.00
<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____</p> <p><input type="checkbox"/> Yes</p>			
<p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>			

Debtor 1 **BRODSKY, BERTIE SUSAN**

Case number (if known)

4:16-bk-885-BMW

4.4 Bank of America Nonpriority Creditor's Name NC4-105-03-14 PO Box 26012 Greensboro, NC 27420-6012 Number Street City State Zip Code	Last 4 digits of account number 9374 When was the debt incurred?	As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____
\$603.00		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.5 Capital One Nonpriority Creditor's Name Attn: Bankruptcy PO Box 30285 Salt Lake City, UT 84130-0285 Number Street City State Zip Code		
Last 4 digits of account number 4790 When was the debt incurred?		
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
\$638.00		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
4.6 Citibank/Goodyear Nonpriority Creditor's Name CitiCorp Credit Card Services/Attention PO Box 790040 Saint Louis, MO 63179-0040 Number Street City State Zip Code		
Last 4 digits of account number 6558 When was the debt incurred?		
As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____		
\$642.00		
Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

Debtor 1 **BRODSKY, BERTIE SUSAN**

Case number (if known)

4:16-bk-885-BMW

4.7	Citibank/the Home Depot Nonpriority Creditor's Name Citicorp Credit Svrs/Centralized Bankrup PO Box 790040 Saint Louis, MO 63179-0040 Number Street City State Zip Code	Last 4 digits of account number 9799	\$6,532.00
When was the debt incurred? _____			
As of the date you file, the claim is: Check all that apply			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Dynamic Collectors Inc Nonpriority Creditor's Name 790 S Market Blvd Chehalis, WA 98532-3420 Number Street City State Zip Code			
4.8	Last 4 digits of account number 6730	\$150.61	
When was the debt incurred? _____			
As of the date you file, the claim is: Check all that apply			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			
Key Bank NW Nonpriority Creditor's Name 127 Public Sq Cleveland, OH 44114-1217 Number Street City State Zip Code			
4.9	Last 4 digits of account number 3364	\$11,001.00	
When was the debt incurred? _____			
As of the date you file, the claim is: Check all that apply			
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Contingent <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Unliquidated <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> Disputed <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt 			
Is the claim subject to offset?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Other. Specify _____ <input type="checkbox"/> Yes			
Type of NONPRIORITY unsecured claim:			
<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts			

Debtor 1 **BRODSKY, BERTIE SUSAN**

Case number (if known)

4:16-bk-885-BMW

4.10	Key Bank NW Nonpriority Creditor's Name <hr/> 127 Public Sq Cleveland, OH 44114-1217 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 6359 When was the debt incurred? <hr/> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$5,570.00
4.11	Keybank NA Nonpriority Creditor's Name <hr/> 127 Public Sq Cleveland, OH 44114-1217 Number Street City State Zip Code Who incurred the debt? Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 3930 When was the debt incurred? <hr/> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$26,497.00
4.12	Keybank National Association Nonpriority Creditor's Name <hr/> PO Box 93885 Cleveland, OH 44101-5885 Number Street City State Zip Code Who incurred the debt? Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another <input type="checkbox"/> Check if this claim is for a community debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Last 4 digits of account number 5907 When was the debt incurred? <hr/> As of the date you file, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Type of NONPRIORITY unsecured claim: <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify _____	\$5,000.00

4.13	Wells Fargo Bank Nonpriority Creditor's Name MAC F82535-02F PO Box 10438 Des Moines, IA 50306-0438 Number Street City State Zip Code	Last 4 digits of account number 2404	\$29,369.00
		When was the debt incurred?	
		As of the date you file, the claim is: Check all that apply	
	<p>Who incurred the debt? Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only</p> <p><input type="checkbox"/> Debtor 2 only</p> <p><input type="checkbox"/> Debtor 1 and Debtor 2 only</p> <p><input type="checkbox"/> At least one of the debtors and another</p> <p><input type="checkbox"/> Check if this claim is for a community debt</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans</p> <p><input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims</p> <p><input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify _____</p>	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name and Address
Allied International Credit Corp
6800 Paragon Pl Ste 400
Richmond, VA 23230-1654

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.11** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **3930**

Name and Address
Ally Financial
200 Renaissance Ctr
Detroit, MI 48243-1300

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.1** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **3443**

Name and Address
Amex
PO Box 297871
Fort Lauderdale, FL 33329-7871

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.2** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **1323**

Name and Address
Bk of Amer
PO Box 982238
EI Paso, TX 79998-2238

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.3** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **7042**

Name and Address
Bk of Amer
PO Box 982235
EI Paso, TX 79998-2235

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.4** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **9374**

Name and Address
Capital One Bank USA N
15000 Capital One Dr
Richmond, VA 23238-1119

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.5** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **4790**

Name and Address
Central Credit Services LLC
PO Box 15118
Jacksonville, FL 32239-5118

On which entry in Part 1 or Part 2 did you list the original creditor?
Line **4.1** of (Check one): Part 1: Creditors with Priority Unsecured Claims
 Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number **3443**

Name and Address Client Services Inc. 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.3</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	7042
Name and Address Client Services Inc. PO Box 1503 Saint Peters, MO 63376-0027	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.6</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	6558
Name and Address Client Services Inc. 3451 Harry S Truman Blvd Saint Charles, MO 63301-4047	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.4</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	9374
Name and Address FMA Alliance, Ltd. PO Box 65 Houston, TX 77001-0065	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.7</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	9799
Name and Address GC Services Limited Partnership PO Box 46960 Saint Louis, MO 63146-6960	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.2</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	1323
Name and Address Goodyr/cbna PO Box 6497 Sioux Falls, SD 57117-6497	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.6</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	6558
Name and Address Northland Group, Inc. PO Box 390905 Minneapolis, MN 55439-0905	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.6</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	6558
Name and Address Portfolio Recovery Associates LLC PO Box 12914 Norfolk, VA 23541-0914	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.7</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	9799
Name and Address Thd/Cbna PO Box 6497 Sioux Falls, SD 57117-6497	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.7</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	9799
Name and Address Viking Client Services PO Box 44997 Eden Prairie, MN 55344-2697	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.7</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	9799
Name and Address Wells Fargo PO Box 14517 Des Moines, IA 50306-3517	On which entry in Part 1 or Part 2 did you list the original creditor? Line <u>4.13</u> of (Check one): <input type="checkbox"/> Part 1: Creditors with Priority Unsecured Claims <input checked="" type="checkbox"/> Part 2: Creditors with Nonpriority Unsecured Claims
Last 4 digits of account number	2404

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1

	Total Claim
6a. Domestic support obligations	\$ 0.00
6b. Taxes and certain other debts you owe the government	\$ 32,796.62
6c. Claims for death or personal injury while you were intoxicated	\$ 0.00
6d. Other. Add all other priority unsecured claims. Write that amount here.	\$ 0.00

6e. **Total Priority.** Add lines 6a through 6d.

\$ 32,796.62

Total claims from Part 2

	Total Claim
6f. Student loans	\$ 0.00
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	\$ 0.00
6h. Debts to pension or profit-sharing plans, and other similar debts	\$ 0.00
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	\$ 116,234.61

6j. **Total Nonpriority.** Add lines 6f through 6i.

\$ 116,234.61

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)	<u>4:16-bk-885-BMW</u>		

Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property(Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Jeffery Alen Stewart 7016B Gaston Ln SW Tumwater, WA 98501-5498	Lease of 7016B Gaston Ln SW, Tumwater, WA
2.2 Nicholas and Ryanne Sturges 7015B Gaston Ln SW Tumwater, WA 98501-6572	Lease of 7015B Gaston Ln SW, Tumwater, WA
2.3 Rachel Krug 7015A Gaston Ln SW Tumwater, WA 98501-6572	Lease of 7015A Gaston Ln SW, Tumwater, WA
2.4 William Scott/Angeline M. Hines 7016A Gaston Ln SW Tumwater, WA 98501-5498	Lease of 7016A Gaston Ln SW, Tumwater, WA

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)	<u>4:16-bk-885-BMW</u>		

Check if this is an amended filing

Official Form 106H Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

- No
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

- No
 Yes.

In which community state or territory did you live? AZ . Fill in the name and current address of that person.

Farley David Rosenstein

6172 E 20th St

Tucson, AZ 85711-5218

Name of your spouse, former spouse, or legal equivalent
Number, Street, City, State & Zip Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor
Name, Number, Street, City, State and ZIP Code

Column 2: The creditor to whom you owe the debt
Check all schedules that apply:

3.1 **American Eagle**
6172 E 20th St
Tucson, AZ 85711-5218

Schedule D, line _____
 Schedule E/F, line 4.12
 Schedule G _____
Keybank National Association

3.2 **Farley David Rosenstein**
6172 E. 20th St.
Tucson, AZ 85711

Schedule D, line _____
 Schedule E/F, line 2.1
 Schedule G _____
Internal Revenue Service

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA
Case number (if known)	4:16-bk-885-BMW

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 income as of the following date:
MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Employment status

Debtor 1	Debtor 2 or non-filing spouse
<input type="checkbox"/> Employed	<input type="checkbox"/> Employed
<input checked="" type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Not employed

Include part-time, seasonal, or self-employed work.

Occupation

Occupation may include student or homemaker, if it applies.

Employer's name

Employer's address

How long employed there?

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
3. Estimate and list monthly overtime pay.
4. Calculate gross Income. Add line 2 + line 3.

For Debtor 1	For Debtor 2 or non-filing spouse
2. \$ 0.00	\$ 0.00
3. +\$ 0.00	+\$ 0.00
4. \$ 0.00	\$ 0.00

Copy line 4 here

	For Debtor 1	For Debtor 2 or non-filing spouse
4.	\$ 0.00	\$ 0.00

5. List all payroll deductions:

- 5a. **Tax, Medicare, and Social Security deductions**
 5b. **Mandatory contributions for retirement plans**
 5c. **Voluntary contributions for retirement plans**
 5d. **Required repayments of retirement fund loans**
 5e. **Insurance**
 5f. **Domestic support obligations**
 5g. **Union dues**
 5h. **Other deductions.** Specify: _____

5a.	\$ 0.00	\$ 0.00
5b.	\$ 0.00	\$ 0.00
5c.	\$ 0.00	\$ 0.00
5d.	\$ 0.00	\$ 0.00
5e.	\$ 0.00	\$ 0.00
5f.	\$ 0.00	\$ 0.00
5g.	\$ 0.00	\$ 0.00
5h.+	\$ 0.00	+ \$ 0.00

6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.

6.	\$ 0.00	\$ 0.00
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7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7.	\$ 0.00	\$ 0.00
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8. List all other income regularly received:

- 8a. **Net income from rental property and from operating a business, profession, or farm**

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a.	\$ 3,503.00	\$ 0.00
-----	--------------------	----------------

- 8b. **Interest and dividends**

8b.	\$ 0.00	\$ 0.00
-----	----------------	----------------

- 8c. **Family support payments that you, a non-filing spouse, or a dependent regularly receive**

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c.	\$ 0.00	\$ 0.00
-----	----------------	----------------

- 8d. **Unemployment compensation**

8d.	\$ 1,040.00	\$ 0.00
-----	--------------------	----------------

- 8e. **Social Security**

8e.	\$ 0.00	\$ 0.00
-----	----------------	----------------

- 8f. **Other government assistance that you regularly receive**

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: _____

8f.	\$ 0.00	\$ 0.00
-----	----------------	----------------

- 8g. **Pension or retirement income**

8g.	\$ 0.00	\$ 0.00
-----	----------------	----------------

- 8h. **Other monthly income.** Specify: _____

8h.+	\$ 0.00	+ \$ 0.00
------	----------------	------------------

9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.

9.	\$ 4,543.00	\$ 0.00
----	--------------------	----------------

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10.	\$ 4,543.00	+ \$ 0.00	= \$ 4,543.00
-----	--------------------	------------------	----------------------

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____

11. +\$ **0.00**

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.
Write that amount on the *Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data*, if it applies

12.	\$ 4,543.00
-----	--------------------

Combined
monthly
income

13. Do you expect an increase or decrease within the year after you file this form?

No

Yes. Explain: **Debtor anticipates employment in near future**

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA
Case number (If known)	4:16-bk-885-BMW

Check if this is:

- An amended filing
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- No. Go to line 2.
 Yes. Does Debtor 2 live in a separate household?
 No
 Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

2. Do you have dependents? No

Do not list Debtor 1 and Debtor 2.	<input type="checkbox"/> Yes.	Fill out this information for each dependent.....	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents names.					<input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes

3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ **732.00**

If not included in line 4:

- 4a. Real estate taxes
4b. Property, homeowner's, or renter's insurance
4c. Home maintenance, repair, and upkeep expenses
4d. Homeowner's association or condominium dues
5. Additional mortgage payments for your residence, such as home equity loans

4a. \$ **0.00**
4b. \$ **0.00**
4c. \$ **0.00**
4d. \$ **0.00**
5. \$ **0.00**

6. Utilities:	6a. Electricity, heat, natural gas	6a. \$ <u>211.00</u>
	6b. Water, sewer, garbage collection	6b. \$ <u>44.00</u>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>270.00</u>
	6d. Other. Specify: Water Delivery	6d. \$ <u>25.00</u>
7. Food and housekeeping supplies	7. \$ <u>350.00</u>	
8. Childcare and children's education costs	8. \$ <u>0.00</u>	
9. Clothing, laundry, and dry cleaning	9. \$ <u>50.00</u>	
10. Personal care products and services	10. \$ <u>125.00</u>	
11. Medical and dental expenses	11. \$ <u>100.00</u>	
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>90.00</u>	
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$ <u>20.00</u>	
14. Charitable contributions and religious donations	14. \$ <u>0.00</u>	
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ <u>264.00</u>	
15b. Health insurance	15b. \$ <u>351.00</u>	
15c. Vehicle insurance	15c. \$ <u>105.00</u>	
15d. Other insurance. Specify:	15d. \$ <u>0.00</u>	
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: Taxes (2012 And 2013)	16. \$ <u>204.00</u>	
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>	
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>	
17c. Other. Specify:	17c. \$ <u>0.00</u>	
17d. Other. Specify:	17d. \$ <u>0.00</u>	
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$ <u>0.00</u>	
19. Other payments you make to support others who do not live with you. Specify: Cell Phone	\$ <u>100.00</u>	
19.		
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$ <u>2,585.05</u>	
20b. Real estate taxes	20b. \$ <u>0.00</u>	
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>	
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>	
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>	
21. Other: Specify:	21. +\$ <u>0.00</u>	
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$ <u>5,626.05</u>	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>5,626.05</u>	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$ <u>5,626.05</u>	
23. Calculate your monthly net income.		
23a. Copy line 12 (<i>your combined monthly income</i>) from Schedule I.	23a. \$ <u>4,543.00</u>	
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>5,626.05</u>	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>-1,083.05</u>	
24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: _____	

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)	<u>4:16-bk-885-BMW</u>		

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person _____

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ BERTIE SUSAN BRODSKY

BERTIE SUSAN BRODSKY

Signature of Debtor 1

Date February 29, 2016

X

Signature of Debtor 2

Date _____

Fill in this information to identify your case:

Debtor 1	BERTIE SUSAN BRODSKY		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	DISTRICT OF ARIZONA		
Case number (if known)	4:16-bk-885-BMW		

Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

		Your assets
		Value of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$ 850,000.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 850,000.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 21,032.55
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 871,032.55

Part 2: Summarize Your Liabilities

		Your liabilities
		Amount you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$ 1,376,082.00
2a.	Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of <i>Schedule D</i> ...	\$ 1,376,082.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$ 32,796.62
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>	\$ 32,796.62
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$ 116,234.61
		Your total liabilities \$ 1,525,113.23

Part 3: Summarize Your Income and Expenses

4.	Schedule I: Your Income (Official Form 106I)	
	Copy your combined monthly income from line 12 of <i>Schedule I</i>	\$ 4,543.00
5.	Schedule J: Your Expenses (Official Form 106J)	
	Copy your monthly expenses from line 22c of <i>Schedule J</i>	\$ 5,626.05

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes

7. What kind of debt do you have?

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the **Statement of Your Current Monthly Income**: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ 3,487.58

9. Copy the following special categories of claims from Part 4, line 6 of **Schedule E/F**:

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>32,796.62</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$ <u>0.00</u>
9g. Total. Add lines 9a through 9f.	\$ <u>32,796.62</u>